

**COUNTY OF LOS ANGELES – DEPARTMENT OF MENTAL HEALTH
SPECIALIZED CHILDREN AND YOUTH SERVICES BUREAU – SA 6 ADMINISTRATION
SA 6 QUALITY IMPROVEMENT COMMITTEE MEETING MINUTES
MARCH 24, 2011**

Attendees:

<i>Meeting</i>	SA 6 Quality Improvement Committee	<i>Date</i>	March 24, 2011
<i>Location</i>	West Central Family Mental Health Services 3751 Stocker Street, Los Angeles, CA 90008	<i>Start Time</i>	9:00 a.m.
<i>Chair</i>	Kimberly Spears, Chairperson Erica Melbourne, PsyD, Co-Chair	<i>End Time</i>	11:00 a.m.

Members Present: Marilyn Campbell, Kedren; Rosary Woods, Kedren; Donna Roque, Drew CDC; Liz Echeverria, SCHARP; Carmen Haley, Alafia; Aimee Cuellar, PIC; Lisa Harvey, Hollygrove; Ashlei Sullivan, LACGC; DeAnn Slaise, SCHARP/Oasis; Julie Elder, SCHARP; Vynette Moore, Shields for Families; Cathi Collins, Counseling 4 Kids; Mimi Nguyen, AP Residential; Jennifer Calmelat, Tessie Cleveland; Ahmad Kausar, SFCP; Ginger Wilkerson, The Children Ins.; Anthony Cooksie SA6 Adm.; Dr. Erica Melbourne, LA Child Guidance; Beverly Byrd, AFH; Terry Robinson, CII; Elva Gutierrez, The Guidance Center; Sharon Scott, The Guidance Center; Jaime Sheehan, Shields for Families; Desiree Odom, Didi Hirsch; Mary Pullard, MHP Consulting Group

<i>Agenda Item/Presenter</i>	<i>Discussion/Findings</i>	<i>Decisions/Recommendations/Actions Scheduled Tasks</i>	<i>Person Responsible/Due Date</i>
Call to Order & Introductions	The meeting was called to order at 9:00 a.m.		
Review of Minutes- November 15, 2010 January 19, 2011	Still need to be completed and approved		
SA6 QA/QI Contact Information Sheet			

<p>Quality Improvement - Dr. Erica Melbourne</p>	<ol style="list-style-type: none"> 1. Cultural competency plan needs to be approved by the state. Will need a half of a day to review plan 2. Patients Rights no new updates Complete log on a regular basis 3. State and County Performance Outcomes data available for May 2009 <p>Recap of Vandana Joshi presentation</p> <p>QI work plan not posted for 2011</p> <ol style="list-style-type: none"> 4. Customer Service Training <ol style="list-style-type: none"> a. Security guard training-guards should be included in staff meetings as much as possible. May be use code words when a crisis situation arises. Guards need to be trained on non violent crisis interventions as well. 5. APS Healthcare/CAEQRO April 18th-21st <p>Focus group 4/20/2011 at West Central 10:00-11:30 with front line staff (no more than 12 people needed) Client services should not be interrupted in order to participate in focus group. No supervisors should be apart of the focus group only those that have contact with clients i.e. receptionist and service providers. The people recommended for the group should have knowledge of procedures within agency.</p> <p>Consumer family focus group 4/20/2011 at West Central 10:00-11:30 is geared to consumers in the TAY population. There will be a Spanish interpreter</p> <p>Focus group with QIC members</p>	<p>Would like information specific to SA 6 only Too much information to take in during short amount of time</p> <p>Training on non violent crisis intervention with Mr. Logan no date set at this time</p> <p>Contact Dr. Erica Melbourne via email of people that are recommended for focus groups</p>	
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<p>Quality Assurance - Dr. Erica Melbourne</p>	<p>4/20/2011 at noon is open to directly operated and contract agencies</p> <p>1. Audit reviews No updates at this time Charts should stay in compliance with current CCCP and other clinical documents even though a review is not scheduled at this time.</p> <p>2. Taxonomy Reports Need to be reviewed, updated and sent back to DMH. This report will be used to update the IS system include termination date of staff once they leave a specific agency. A claim can be submitted for a staff up to a year after termination at a specific reporting unit.</p> <p>3. New Procedure Codes 96372 H0033 both are for MDs and nurse practitioners.</p> <p>4. CCCP Update In the process of being revised Coordination page (3rd page of CCCP) will not be necessary if the client is receiving services at only one agency. Coordination page will only be necessary if client is receiving services at multiple agencies</p> <p>5. SD/MC Rehabilitation Option & TCM Manual- May 2011</p> <p>6. Clinical Records a. EHRs/Clinical forms crosswalk update content needs to be on a readable document that client/caregiver can have a copy of doesn't have to be the exact form used in reference to the CCCP referenced flow chart paper clinical record form terms and translation to data elements and E-reports in an EHRs found in Clinical Information in</p>	<p>Contact Mary Liu mjoquilon@dmh.lacounty.gov if the taxonomy reports has not been received for a specific rendering provider</p>	
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	<p>paper clinical records and electronic health record systems (draft)</p> <p>7. PEI EBP/SS</p> <p>CCCP rules do not change from being completed on annual basis even though the EBP may call for updates every couple of weeks</p> <p>Service provider responsibility to update the treatment plan as needed for EBP within the annual</p> <p>CCCP information for a client that is in foster care or ward of the court doesn't have to be shared with a DCFS worker only the coordination page (3rd page of CCCP)</p>		
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